



London Ambulance Service **NHS**
NHS Trust

Procedure for Vehicle Equipment Use and Inventory Checks

DOCUMENT PROFILE and CONTROL

Purpose of the document: is to ensure that all London Ambulance Service NHS Trust (LAS) vehicles and related equipment are in a safe and ready state of working order in keeping with a professional ambulance service that provides pre-hospital care, treatment and appropriate ambulance transport for patients.

Sponsor Department: A&E Operations – Logistics

Author/Reviewer: Head of Operational Support. To be reviewed by July 2013

Document Status: Final

Amendment History			
Date	*Version	Author/Contributor	Amendment Details
06/08/10	2.1	Head RM & Ed Gov Mgr	Minor revisions and upgrading of monitoring section
21/07/10	1.9	Ed Governance Mgr	Revised Appendix 2
18/06/10	1.8	Logistics Manager	Objective 3.2 changed.
27/09/08	1.1	Head of Operational Support	Bridging statement and implementation plan
10/06/10	1.7	Ed Governance Mgr	Amendments to S.5 and addition of text in the training section of the Imp Plan.
09/06/10	1.6	Head RM	Objective 3.1 changed
01/06/10	1.5	Ed Governance Mgr & Head RM	New S.5 Use of Equipment and amendment to title.
04/05/10	1.4	Logistics Manager	S.2 Vehicle Daily Inspection removed
22/04/10	1.3	Logistics Manager	New draft
08/04/10	1.2	Author & Staff Side Reps	

***Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

For Approval By:	Date Approved	Version
VEWG	30/07/10	2.0
Chief Executive	01/06/04	1.0
Agreed by Trust Board (If appropriate):		

Published on:	Date	By	Dept
The pulse	08/10/10	Governance Administrator	GCT
Announced on:	Date	By	Dept
RIB	10/10	Governance Administrator	GCT

EqIA completed on	By
17/06/10	Logistics EQIA team
Staffside reviewed on	By

Links to Related documents or references providing additional information		
Ref. No,	Title	Version
	Procedure for Driving and Care of Service Vehicles	
	Road Traffic Act	
	Procedure for Readiness to Respond for Duty	
	Dress Code for Uniformed Staff	
	Procedure for Reporting Vehicle Availability, Defects & Arranging Breakdown and Recovery	
	Infectious Control Procedure	
	New Roadworthiness checks book (not yet issued)	
OP/025	Procedure for the Scheduled Maintenance and Exchange of Ambulance Equipment	
TP/053	Policy for the Supervision of Clinical Staff in Training	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are neither controlled nor substantive.

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1. Introduction

- 1.1. The purpose of this procedure is to ensure that all London Ambulance Service NHS Trust (LAS) vehicle equipment is in a safe and ready state of working order and used correctly in keeping with a professional ambulance service that provides pre-hospital care, treatment and appropriate ambulance transport for patients.

2. Scope

- 2.1. This procedure applies to all operational members of London Ambulance Service NHS Trust and anyone else who is tasked with equipping vehicles or checking vehicle equipment.

3. Objectives

- 3.1. To achieve correct use of equipment by identifying which categories of staff are authorised to use medical devices and the LAS approach to determining the necessary training required.
- 3.2. To provide a process for the checking of equipment on LAS vehicles..
- 3.3. To provide a comprehensive inventory of A&E, PTS, ECP, Urgent Care and other non specialist Vehicle Equipment.
- 3.4. To provide A&E and PTS with a list of what they should carry with them while on duty.

4. Responsibilities

- 4.1. The responsibility for ensuring that the procedure is enforced lies with the Trust Board and the Chief Executive Officer.
- 4.2. The Director of Operations is responsible for overseeing the procedure on a day-to-day basis.
- 4.3. It is the responsibility of the Vehicle and Equipment Working Group (VEWG) to monitor the application of this procedure.
- 4.4. It is the responsibility of Duty Station Officers to ensure that all service vehicle checklists are fully up to date and an adequate supply available to all staff on every station.

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- 4.5. It is the responsibility of each member of A&E and PTS staff to ensure that they carry with them Personal Protective Equipment clothing at all times. For A&E and 'Green Base' staff only this includes their stab vest and Emergency Crew Assistance (ECA) Mobile Phone.
- 4.6. The driver of the vehicle has a legal responsibility for ensuring that the vehicle is roadworthy and the crew has a joint responsibility for ensuring that the appropriate check list has been completed
- 4.7. It is the responsibility of all crews to ensure that all equipment in use and carried on their vehicle has been authorised for use by the LAS or is part of an equipment evaluation, which has been authorised by the VEWG.

5. Use of Equipment

- 5.1 An inventory of the medical devices used within the LAS is shown as Appendix 2. This also reflects the various grades of staff that are trained and authorised to use the equipment listed. The process for determining which staff groups are authorised to utilise medical devices stems from the core business needs of the organisation. Roles and related responsibilities are subsequently developed through workforce planning and clinical development forums to meet specific operational requirements. The Training Strategy Group (TSG) is ultimately responsible for approving the levels of care performed by staff.
- 5.2 The Clinical Education Steering Group (CESG) is also responsible for overseeing the development and delivery of clinical LAS training programmes. This includes overseeing the design and development of equipment training initiatives. As part of this they must provide assurance to the Training Strategy Group (TSG) that the content meets all statutory (legal) regulatory (external) and mandatory (internal) requirements.

Statutory and regulatory agencies include:

- Care Quality Commission
- Health & Safety Executive
- National Health Service Litigation Authority
- Institute of Health Care & Development
- Health Professions Council

Internal groups and committees include:

- Quality Committee
- Clinical Quality, Safety & Effectiveness Committee
- Risk Compliance and Assurance Group
- Clinical Education Steering Group
- Corporate Health & Safety Group
- Vehicle & Equipment Working Group

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- 5.3 The role of reviewing and authoring new training documentation is performed by small project teams, comprising of staff from the Department of Clinical Education & Development and the Medical Directorate. Such work is conducted in close liaison with equipment manufacturers/suppliers etc, thus ensuring that all LAS training material is in strict compliance with relevant design specifications and guidelines.
- 5.4 The frequency of training updates is determined based on an assessment of the equipment being used, the manufacturers directions, the frequency of use, any statutory or regulatory guidance, the technicality of the product and where equipment is already in use, the level, type and frequency of adverse incidents. Once the frequency of training has been agreed by TSG it will be set out in the medical devices inventory and the Training Needs Analysis (*hyperlink to that once it is on the pulse*) Such decisions are also informed by outcomes from the various risk management monitoring mechanisms that ultimately report into the LAS Quality Committee. All resultant training plans are then formulated by the Assistant Director Professional Education and Development for agreement by the CESG, and approval by the TSG, prior to publication to all staff via the LAS intranet site 'the pulse'.
- 5.5 Section 9 of TP/053 Policy for the Supervision of Clinical Staff in Training (*hyperlink to policy*) details the process for ensuring that the identified training needs of staff are met.

6. Vehicle Equipment Checks

- 6.1. At the commencement of the shift or as soon as practically possible, ambulance staff should complete a vehicle equipment check appropriate to vehicle type and layout and record the findings on the LA1 / PTS VDI.
- 6.2. Users of LAS vehicles should select a checklist appropriate to the service vehicle type being used from the station supply of inventories. All checklists will be kept up to date by the VEWG and will be accessible on the LAS Common Server and Intranet ('the pulse').
- 6.3. Any delay in the availability of an A&E vehicle must be reported to Emergency Ambulance Control (EOC) at the earliest opportunity and initials exchanged. PTS staff must report any delays to their respective control. This information must also be recorded by the A&E staff on the crews LA1 – See appendix 1.
- 6.4. The checklist should be completed as soon as possible. Should an ambulance crew be unable to complete either the checklist or the equipment checks by the end of their shift due to the exigencies of the LAS, an entry must be recorded on the front of the LA1 / PTS.
- 6.5. Whilst carrying out the check, a simple function test must be carried out on appropriate items of equipment with electric / mechanical moving parts to ensure these are in good working order.

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- 6.6. Any defects should be recorded on the LA1 / PTS VDI and reported immediately to an appropriate officer / manager. Where practical, the defective equipment should be exchanged from station stocks or through the Equipment Exchange Scheme for certain specified items. Once withdrawn from service, defective equipment must be clearly labelled with the nature of the defect, decontaminated in accordance with LAS policy and returned to the Station Office, other secure area or red container for exchange under the Equipment Exchange Scheme. (See OP/025 Procedure for the Scheduled Maintenance and Exchange of Ambulance Equipment).
- 6.7. Any deficiencies not replaced during the shift should be clearly identified on the LA1 / PTS VDI and reported to EOC

7. Vehicle Changes

- 7.1. Should users of LAS vehicles need to change their vehicle for repairs or servicing, the equipment on the new vehicle should be checked with the use of the appropriate checklist. The crew will work together to complete this task as efficiently as possible. A function test of equipment must also be carried out. It is essential that equipment is stored uniformly on all vehicles to assist at multi-vehicle and major incident scenes. All checklists should be kept in the cab of the vehicle.

8. Labelling Equipment

- 8.1. All non-disposable equipment will be labelled so as to identify it to the London Ambulance Service NHS Trust

9. Equipment Left at Hospitals

- 9.1. Non-disposable equipment left at hospitals for the clinical benefit of the patient should be recorded on an LA1 and EOC should be advised. This ensures that on-coming crews are fully aware of the missing items and can attempt to retrieve the equipment. Once retrieved this should be noted on the LA1

10. Managers Lease Cars

- 10.1. It is the responsibility of individual managers with lease cars to ensure that they carry with them at all times personal issue clothing and kit and any other equipment or supplies which may be deemed necessary in accordance with their individual skill level.

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Implementation Plan

IMPLEMENTATION PLAN	
Intended Audience	All users of LAS vehicle equipment
Dissemination	Available to all staff on the Pulse
Communications	Revised Procedure to be announced in the RIB and a link provided to the document
Training	This procedure will be used as a reference source during all training sessions relating to vehicle inventory and equipment checking.
Monitoring	<p>Station management teams will monitor staff compliance in completing the vehicle equipment checklists by checking the LA1/PTS VDI on a weekly basis. The level of compliance will be reported back through the Area Governance Groups which report through to the Clinical Quality Safety and Effectiveness Group.</p> <p>Use of the equipment will be checked by Team Leaders every six months as part of the Operational Workplace Review in order to see that equipment is being used correctly and in accordance with Service training procedures. At the local level results are fed through to line managers for Personal Development Review. The LAS Practice Learning Managers monitor results for discussion at CESG for onward reporting to TSG.</p>

Appendix 1

LA1

London Ambulance Service NHS Trust – Accident/Emergency Journey Summary

DATE:		FLEET No:		CALL SIGN:		Pulse Oximeter	LAS
STATION:		REG No:		DEFIB No:	LAS	Portable Radio A	
ON DUTY TIME:		OFF DUTY TIME:		AED No:	LAS	Portable Radio B	
						Start mileage:	

Cad No.	Time Rec.	Patient Name/ Reason Journey	for	On Scene	From	To	RTB/Next Call Time:	Odometer Reading
							Finished Odometer Reading	

DRIVER:		SIGNATURE:		SUPERVISOR/OBSERVER:	
ATTENDANT:		SIGNATURE:		SIGNATURE:	

* Example of LA1 shown here is not to scale or format layout

THE LEGAL RESPONSIBILITIES AS THE DRIVER OF THE VEHICLE:

Lights	Clean lens and in full working order
Brakes	<i>Static brake test (foot and hand). Mobile brake test – remember to brake early for the first hazard at slow speed.</i>
Tyres (A tyre pressure gauge is kept on station). Tyre size 185R14	<i>Depth – 2.0mm over the centre ¾ of the tread, and in generally good condition. Pressures – Front 60, Rear 45.</i>
Silencer:	<i>Doesn't leak and in good condition</i>
Windscreen wipers and washers	<i>Working with blades in good condition and washers working. Windscreen must be clean and clear.</i>
Horn	<i>In working order. Do not use between 23.30 and 07.00 in built up areas</i>
Seat belts	<i>In good condition and not frayed. Static lock test.</i>
Steering	<i>Check steering for excessive play</i>
Speedometer	<i>Working</i>
M.O.T. (All ambulances require an MOT after 1 year)	<i>In date, as per workshop sticker on windscreen. (Check with the Resource Centre if sticker is missing)</i>
Taxation and/or exemption disk	<i>Legible and clearly displayed.</i>

YOU ARE ALSO RESPONSIBLE FOR:

Oil	Between min and max mark
Water	<i>Cooling system and/or header tank filled to the appropriate mark</i>
Supplementary Lights	All other internal and external lights working
Battery	<i>Vehicle should be put back on charge on your return to station, where practicable</i>
Radio	<i>Fitted and working and on the correct channel. Check radio following a vehicle change</i>
Engine	<i>Check that the engine</i>
Petrol or Diesel	<i>Not less than ½ of a tank at the commencement of the shift. Ensure that fuel used is appropriate to vehicle and that if unleaded fuel is required USE ONLY unleaded NOT super unleaded.</i>
¼ ½ ¾ F	
Vehicle Clean – inside and out	

EQUIPMENT LEFT AT HOSPITAL		
Hospital	Equipment	Recovered

Use of LAS Diagnostic & Therapeutic Equipment (Relative to Staff Grade)

Type of Equipment	A&E Support	Student Paramedic ₂	Student Paramedic ₃	EMT 3	EMT 4	Paramedic	Emergency Care Practitioner	Team Leader	Manager		
									Technician	Paramedic	FPOS
Paramedic PALS Pack (Red)	N	N	N	N	N	Y	Y	Y	N	Y	N
Stif Neck Cervical Collars Bag: - (Green)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Vacuum Splints	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
LAS Entonox Kit	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
LAS Oxygen Therapy Pack - (Green) containing Microvent Head (BNOS)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Nasal cannulae - (1 x Adult, 1 x Child) ②	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
O ₂ Medium concentration masks - (1 x Adult, 1 x Child) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
O ₂ Non - rebreathing trauma masks - (1 x Adult, 1 x Child) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
O ₂ Nebuliser kit / masks (1 x Adult, 1 x Child) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Nebuliser 'T' piece ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
O ₂ Tubing ②	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Oro - pharyngeal airways - (Sizes 0 – 4) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Naso - pharyngeal airways - (sizes 6 & 7) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Adult Disposable Bag Valve Mask ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Paediatric Disposable Bag Valve mask ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
LAS Primary Response Pack - (Green)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Laerdal Heartstart FR2 AED	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Laerdal Heartstart FR2 AED (No screen)	Y	N	N	N	N	N	N	N	N	N	N
Defibrillation pads - (1 x Adult) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Defibrillation pads - (1 x Paediatric) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
ECG monitoring block and leads	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
ECG monitoring electrodes	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Memory cards - (1 x holder, 1 x AED)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Thermoscan Pro 3000 Tympanic Thermometer	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Lifescan Blood Glucose Monitoring Kit	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Aneroid Sphygmanometer and carry case	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Peak flow meter	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Oxygen cylinder - 'CD' size (440 litres)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Oro-pharyngeal airways - (4 x size 0, 4 x size 1, 4 x size 2) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Oxygen Nasal Cannula - (Paediatric) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Oxygen Mask Non – Rebreathing ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Oxygen Mask Medium Concentration ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Nebulisation Sets - (Paediatric) ②	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	N

Oxygen Nasal Cannula - (Adult) ②	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Nebulisation Sets - (Adult) ②	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Catheters for use with Aspirators - (2 x size 8 ch, 2 x size 18 ch, 3 x Sump) ②	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Lifepak 12 Defibrillator / Monitor & attachments	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Carry Sheet	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Sager Traction Splint - (Blue Bag)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Selfglide Board - (Yellow)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Laerdal Suction Unit (LSU)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Dressings Case	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y
Burns Dressings Case	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Maternity Case ②	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Infectious Kit Case	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
L.E.D. - London Extrication Device - (Green Bag)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Fracture Immobilisation Box Splint Set	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Compact '2' Chair (127kg or 200kg max.)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Head Immobiliser Blocks - (Green)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Head Immobiliser Backboard with Head & Chin Straps - (Green)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Ferno Orthopaedic Scoop Stretcher Strap Set - (3 x Straps & Carry Bag - Orange)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Ferno Orthopaedic Scoop Stretcher	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Extrication Board - (Yellow / White)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Extrication Board Speed Clips - (Yellow / Black)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Bax Board (Green / Yellow)	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Spider Strap Set	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Laerdal Speedclips Head Immobiliser	N	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Oxygen Cylinder - 'HX' size - (2,300 litres)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Ferno Pegasus Trolley Bed	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Ferno Falcon Six Trolley Bed	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Ferno 35A Transporter Trolley Bed	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Stryker Trolley Bed	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Patient Handling Kit (Green Bag)	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Q-Straints A&E Carry Bag (Black bag) containing	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N
Nonin Pulse/O2 Sat Finger Probes	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	N

Key:

Equipment items reflecting the ② symbol are designed for single use only. All other listed items are supplied as 'reusable' devices, which following use must be cleaned and disinfected in accordance with the guidance contained in the LAS Infection Control manual.